EIF maturity matrix: Speech, language and communication in the early years

A self-assessment tool to support a system-wide approach to improving outcomes for children in the early years, with a focus on speech, language and communication skills.

Closing the 'word gap' in the early years

The early years are a critical time for all children to develop strong cognitive, social and emotional foundations. Early language acquisition impacts on all aspects of young children's development. It contributes to their ability to manage emotions and communicate feelings, to establish and maintain relationships, to think symbolically, and to learn to read and write.

As speech and language is both an essential building block for a range of cognitive and social and emotional skills, and predictive of a range of later-life issues. This means it is an excellent way of assessing typical development in the early years – a primary indicator of child wellbeing and social mobility.

The UK prevalence rate for early language difficulties is between 5%–8% for all children, and over 20% for those growing up in low-income families. Tackling this gap in early language acquisition is complex and requires a system-wide approach across maternity and the early years.

In this document you will find:

- A brief overview of the evidence on early language development.

- An introduction to using a systemic approach to improve speech, language and communication outcomes for children.

- Descriptors for 10 key elements which make up an early intervention system which is focused on speech, language and communication outcomes for children in the early years.

- A recording sheet, user guide and single-page summary of the maturity matrix.

Speech	Language	Communication
REFERS TO:	**REFERS TO:**	**REFERS TO:**
saying sounds accurately and in the right places in words. It also relates to speaking fluently, without hesitation, prolonging or repeating words or sounds. It also means speaking with expression in a clear voice, using pitch, volume and intonation to add meaning.	understanding and making sense of what people say. It also includes using words to build up sentences which are used in longer stretches of spoken language and to build conversations. This skill involves putting information in the right order to make sense.	how we interact with others; being able to talk to people and take turns as well as change language to suit the situation. It includes non-verbal communication, for example eye contact, gestures and facial expressions. Communication also relates to being able to consider another person's perspective, intentions and the wider context.

Source: RCSLT, 2017

Overview of the evidence

1. Language difficulties predict problems in literacy and reading comprehension, but they may be indicative of problems in children's behaviour and mental health as well. Once children enter school, language skills remain a strong predictor of their academic success. Evidence also shows that children with poor vocabulary skills at age 5 are more likely to have reading difficulties as an adult, more likely to have mental health problems, and more likely to be unemployed.

2. Language development is not just about words. While language disparities have traditionally been described in terms of a 'word gap', evidence tells us it is about quality not quantity, specifically the quality of the child-directed speech that parents use with their children on a day-to-day basis.

3. Reading and rhymes are important, but not sufficient. Studies show that, during the early years, language is best supported through developmentally appropriate parent–child conversations that respond to the child's interests. So, in infancy this means child-directed speech involving household items and toys. For toddlers, quantity is crucial, particularly in terms of new vocabulary. In the third year, children benefit from more diverse and grammatically complex language, and beyond that the opportunity to use structured narratives in conversations.

4. The content of parent–child conversations really counts. Conversations about objects and living things help children to understand how the world works, which in turn supports their analogical reasoning capabilities as they grow older. Conversations about the thoughts, feelings and desires of others increases their empathy and understanding of others' perspectives. Parent–child 'number talk' has been found to support children's early counting capabilities. Early counting skills, in turn, strongly predict children's mathematical achievement in later primary and secondary school.

5. Most children develop typically, including those who grow up in disadvantage. However, there is strong evidence to suggest that the achievement gap is underpinned by income-related gaps in children's language and communication skills, which are already detectable during the second year of life. Early intervention has an important role to play in supporting children who are showing early signs of atypical development.

A systemic approach

Improving speech, language and communication outcomes as part of a local early years system depends on effective arrangements for strategy and planning, leading change, delivering effective single and multi-agency working, and evaluating progress. These are the four dimensions (Plan, Lead, Deliver, Evaluate) which form the structure of this maturity matrix.

Each dimension has two or three key elements, which are described at each of four different progress levels, to allow a local area to rate their current position and identify the steps they need to take to improve.

The matrix is one of a suite of early intervention matrices developed by EIF, and is produced as part of the Department for Education's Social Mobility Action Plan. The design draws on work by the Good Governance Institute, and EIF's work on evidence and local practice.

Using the matrix

The maturity matrix is designed to support practical change through positive challenge within local partnerships. It can also be used to set a baseline and track progress over time.

- **Group discussion:** the matrix can be used as the basis for a structured stakeholder conversation or workshop, sharing different views and building consensus about progress and priorities.

- **Online version:** the matrix can also be completed online by key stakeholders individually before using the results to guide a multi-agency workshop. This method means that stakeholders are better prepared when they come together and can move from talk to action more quickly.

The matrix is also designed to help local areas connect with resources that help them with their development journey. At the end of each of the 10 key element sections there are links to sources of evidence, practice guidance and case study illustrations.

Throughout the matrix, 'speech, language and communication needs' has been abbreviated to 'SLCN'.

More details about using the matrix as part of an **LGA Early Years Peer Review** are available from info@eif.org.uk.

DIMENSIONS	KEY ELEMENTS	SUB-ELEMENTS	PROGRESS LEVELS			
PLAN	**1. Strategy**	1.1 Vision, strategy & plan 1.2 Population needs assessment	**1** **BASIC LEVEL** Principle accepted and commitment to action	**2** **EARLY PROGRESS** Initial development	**3** **SUBSTANTIAL PROGRESS** Initial results achieved and positive outcomes evident	**4** **MATURE** Embedded good practice, others learning from achievements
	2. Commissioning	2.1 Commissioning arrangements 2.2 Use of resources				
	3. Workforce Planning	3.1 Workforce analysis 3.2 Workforce development				
LEAD	**4. Partnership**	*No sub-elements*				
	5. Leadership	*No sub-elements*				
	6. Community Ownership	6.1 Engagement 6.2 Community assets				
DELIVER	**7. Services & Interventions**	7.1 Quality 7.2 Evidence-based programmes / interventions 7.3 Coordinated working				
	8. Information & Data	8.1 Data collection / use for targeting 8.2 Information sharing 8.3 Information for families				
EVALUATE	**9. Outcomes**	9.1 Outcomes framework 9.2 Family access & experience				
	10. Using & Generating Evidence	10.1 Using evidence well 10.2 Local evaluation				

User guide

EIF maturity matrix: Speech, language and communication in the early years

What is the maturity matrix?

The matrix is a self-assessment tool to help measure how advanced your local area is in creating a local system to help children in their early years to thrive and to guide planning to make this local system more effective. The matrix has a particular focus on speech, language and communication skills.

How has the matrix been developed?

The matrix has been developed using learning from experts involved in delivering prevention and early intervention, and from an understanding of effective practice in local places, in particular EIF's 'Pioneering Places'. It has drawn from matrices such as those developed by the Good Governance Institute. It also draws heavily from EIF's evidence reviews (see www.eif.org.uk), including *Foundations for Life* (2016); *What works to enhance the effectiveness of the Healthy Child Programme* (2018); *Language as a child wellbeing indicator* (2017); and *Key competencies in early cognitive development: Things, people, numbers and words* (2018, forthcoming).

How is the matrix organised?

The matrix is divided into four dimensions, each an important part of a joined-up local system to help children in their early years to thrive: Plan, Lead, Deliver, Evaluate. Each dimension is then divided up into key elements to help you to rate where you think your local area is, from "basic" to "mature".

How does it work?

The matrix can be completed individually, usually using an online survey available from EIF, or as a structure for a group discussion, or both. Participants rate the local area against the 10 key elements, identifying supporting evidence for their rating, gaps and areas for development, and priorities for action. The matrix works best when a range of people with different experiences and perspectives take part, and when they can hear and moderate each other's contributions to build a fuller picture.

It seems quite complicated?

The matrix looks complicated to begin with but is actually a simple way to measure something which is far more complex - the local arrangements for helping families across lots of different organisations. Some of the questions may seem less relevant to different participants, or difficult to understand because they require more specialist knowledge, but this is why a range of perspectives is needed – each of the key elements is important, even if not every participant is able to rate them all.

And finally before you start…

Here are some tips from people who have used the matrix before:

"Don't score yourself at a higher level if you don't met the criteria of the lower levels."

"Filling in the matrix is not quick, but it's worth it."

"Not everything can be your top priority!"

"Be specific when identifying actions."

"Remember, this isn't just about your service, it's about all the different services which make up the local support system for families as well as what communities do for themselves."

MATURITY MATRIX SUMMARY: Speech, language and communication in the early years

This page is a single-side summary of the EIF maturity matrix – good for a quick check but please see the full version for all the important detail.

KEY ELEMENTS		PROGRESS LEVELS			
		❶ Basic Level	❷ Early Progress	❸ Substantial Progress	❹ Mature
PLAN	1. Strategy	Addressing SLCN in the early years is recognised as important but has had little impact on planning	Partners collaborate to analyse data on early years needs and outcomes, including SLCN	A multi-agency early years strategy is in place, with a clear narrative on SLCN	The early years strategy has been reviewed and refreshed, taking account of impact
	2. Commissioning	Single agency commissioning for early years, but commissioners recognise the need to collaborate to impact on SLCN	The local authority and CCG are working towards joint early years commissioning. Work is underway to pool/align budgets	Commissioning is aligned to the early years strategy. Investment in early years services is a local priority	Joint commissioning for early years, including SLCN, is extensive and routine. Shifts in investment to early childhood intervention
	3. Workforce Planning	Limited understanding of who in the workforce can impact on SLCN and what their learning needs are	Initial workforce mapping underway. Speech & Language Therapists have key role in training the wider workforce	There is a strategy for building early years workforce capacity & capability including promoting skills for SLCN development	Workforce receives high quality training & supervision on early intervention in the early years, including meeting SLCN
LEAD	4. Partnership	Some partnership dialogue on early years & SLCN but no governance	Identified partnership group responsible for early years goals	Partnership group having positive impact & driving local plan	Influential and effective partnership group
	5. Leadership	Increasing awareness of importance of SLCN	Some senior advocates for early years and SLCN	Active buy-in to early years goals at operational & strategic levels	Senior leaders speak with one voice on early years & SLCN
	6. Community Ownership	Children and families are consulted in general	Family champions involved in strategy development	Families co-design strategy and commissioning	Peer support and community delivery are prioritised
DELIVER	7. Services & Interventions	Some key services are judged to be underperforming	Key services are good & improving. Shared early years pathways are being developed	All children receive the mandated Healthy Child Programme checks and take-up of entitlements is high	Key services are good or excellent. Coherent portfolio of evidence-based interventions
	8. Information & Data	Commitment to information sharing but there are gaps	Some information sharing on across key early years services	Information sharing is routine and timely	Families access up-to-date and accurate service information
EVALUATE	9. Outcomes	Recognised that SLCN are important to measure	Early years (including SLCN) outcomes framework in development	Families generally have a smooth journey through services	Outcomes show consistent improvement
	10. Using & Generating Evidence	Evaluation is recognised as important	Stakeholders are reviewing the latest evidence on maternity and early child development	Local leaders and decision-makers are skilled and confident users of evidence	A common evaluation framework is used across early years services

PLAN	1. STRATEGY

This element focuses on the local vision, strategy and plan for the early years, including speech, language and communication. It considers how well community needs are understood, how data is used and what the shared priorities are for taking action.

1.1 VISION, STRATEGY & PLAN

1.2 Population needs assessment

1 BASIC LEVEL
- Addressing speech, language and communication needs (SLCN) in the early years is recognised as important, but as yet this has had little impact on planning, commissioning or implementation.

2 EARLY PROGRESS
- Action plans are being developed to address speech, language and communication needs in the early years through prevention and early intervention. Work is underway to develop a local multi-agency early years strategy which includes a focus on SLCN.

3 SUBSTANTIAL PROGRESS
- A local strategy provides focus for multi-agency planning and delivery of early years services, including for SLCN. The strategy takes account of evidence and population needs assessment, and spans universal, targeted and specialist maternity and early years services.
- The strategy covers cognitive development from the antenatal period onwards, including targeting preterm birth risks and maternal mental health; targeted home visiting support; enriched child care from age 2; & SLCN interventions for children with language delays from age 2.
- The strategy addresses barriers that disadvantaged families face and recognises wider issues such as parental conflict & multiple disadvantage.
- The strategy is being delivered by an action plan which is monitored at a senior level. Other major local strategies relating to children, families and communities refer to the early years and SLCN.

4 MATURE
- Progress in delivering the multi-agency early years strategy has been reviewed and the strategy refreshed, taking account of impact to date including on speech, language and communication outcomes.
- The refreshed strategy responds to local learning about what has worked well and where improvements need to be made.

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EIF maturity matrix: Speech, language and communication in the early years

PLAN	1. STRATEGY
	1.1 Vision, strategy & plan
	1.2 POPULATION NEEDS ASSESSMENT
1 BASIC LEVEL	• Local strategic needs assessments include some limited data on the early years, and there is agreement to describe the specific local narrative on speech, language, communication needs.
2 EARLY PROGRESS	• Some partners share and analyse data about early years needs and outcomes, and use this to identify vulnerable groups, including those with SLCN needs. • The association between speech, language and communication development and family income, social deprivation and mother's education is recognised.
3 SUBSTANTIAL PROGRESS	• Partners routinely share maternity and early years data for needs analysis, identifying vulnerable cohorts. Early years data and intelligence is included in Partnership needs assessment and influences the decision-making and prioritisation in the early years strategy. • The needs assessment includes a clear narrative on SLCN at key touchpoints (2 year review, Early Years Foundation Stage Profile). It takes account of incidence of SLCN in schools, and compares this with expected prevalence levels to understand under-identification. It considers the interface with Autism Spectrum Disorders & other difficulties or disabilities; and with risk factors such as premature birth, adolescent motherhood, maternal depression, and lack of parent qualifications.
4 MATURE	• A robust & up-to-date early years analysis is in place covering population needs and service demand and provision, based on partnership-wide data. The analysis is routinely used to identify target groups, design services, agree priorities and measures, forecast trends and plan strategy, and influences family and community strategies.

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Sources of evidence / guidance to support further development

• 'Language as a child wellbeing indicator' (EIF, September 2017): Overview of prevalence and impact of early language difficulties, and detailed examination of language development and how language difficulties emerge; factors associated with language difficulties; and the ways social disadvantage impacts on children's language and communication development.

• 'Key competencies in early cognitive development: Things, people, numbers and words' (EIF, forthcoming 2018): Summarises further evidence highlighting the importance of children's early language development, including implications for practice and commissioning.

• 'Better Communication: Shaping speech, language and communication services for children and young people', (2012, RCSLT): A range of case study examples and analysis to support planning and commissioning, including Nottinghamshire's Language for Life Strategy and Stoke Speaks Out.

• Case example presentations used at Bercow oral evidence sessions, including Greater Manchester's early years speech, language & communications pathway and specification: and Knowsley's Healthy Child Programme language pathway.

• 'Early Language Development: Needs, provision, and intervention for preschool children from socio economically disadvantage backgrounds' (EEF, October 2017): information on the prevalence of communication and language delays in disadvantaged and non-disadvantaged populations.

• Early Communication Screening (Stoke, October 2016): Example of needs analysis relating to speech, language and communication need.

PLAN	2. COMMISSIONING

This element focuses on how the local area uses strategic commissioning tools to deliver the local strategy for early years, including speech, language and communication needs, and works together to increase impact. This includes procurement processes and service specifications; market management; mapping, aligning and pooling resources; and performance monitoring and reporting.

2.1   COMMISSIONING ARRANGEMENTS

2.2   Use of resources

1 BASIC LEVEL

- There is single agency commissioning for early years services, but commissioners are in dialogue about interdependencies.
- There is a recognition that partners need to commission a more coherent early years system for vulnerable families if they are to impact on SLCN.
- The local authority and CCG are in dialogue about how to best meet their statutory duty to jointly commission SEND services.

2 EARLY PROGRESS

- The local authority and CCG are working towards joint early years commissioning, and are aligning specifications for core early years services such as children's centres and health visiting, as well as SEND services.
- There is work on a common and evidence-based approach to commissioning for good speech, language and communication outcomes.
- Commissioners have an understanding of the market for early years services, and an agreed position on how this can be developed to impact on speech, language & communication needs in vulnerable families

3 SUBSTANTIAL PROGRESS

- Commissioning is aligned to the local vision and multi-agency strategy for early years services, and explicitly addresses speech, language and communication outcomes.
- There is some joint commissioning using aligned budgets or partnership agreements, and the local authority and CCG have developed a joint specification for speech & language therapy services, which includes their role in providing information, training, coaching and support to the wider workforce.
- Performance monitoring and reporting are through a single process and it is clear which commissioners are responsible for different parts of the early years system.
- Market development work is underway, and responds to the priorities in the early years strategy, including applying the evidence base and developing local evidence.

4 MATURE

- Commissioning and decommissioning is driven by the local early years strategy.
- Joint commissioning is extensive, routine, formally agreed, and covers the whole early years system including maternity services; early education; SEND; speech, language and communication needs; library services; parent and child mental health; health visiting and children's centres.
- Commissioning for the local authority and CCG is led by an early years joint commissioner with a single budget and performance management process.
- The market is well-developed and evaluation is routine.

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EIF maturity matrix: Speech, language and communication in the early years

PLAN	2. COMMISSIONING
	2.1 Commissioning arrangements

2.2 USE OF RESOURCES

1 BASIC LEVEL	• Partners recognise the need to treat local early years services and assets as part of a joined-up system, but have not mapped the resources that make up this system. • There is little investment beyond statutory requirements.
2 EARLY PROGRESS	• The resources used for some maternity and early years services are identified, including Early Years Pupil Premium, & initial analysis of prioritisation, sufficiency and cost-benefit is underway. • Work is under way to create pooled or aligned budgets to sustain funding and achieve early years goals.
3 SUBSTANTIAL PROGRESS	• Mapping and analysis of resources for maternity and early years services, including childcare places and SLCN, is advanced and is starting to inform resource allocation as part of the early years strategy. • Community and family assets are recognised as important. Peer support, community development and involvement in delivery, and the role of parents as a child's first teachers are included in the resource analysis. • Investment in early years services is a local priority, and local partners pool and align funding to support delivery of the early years strategy. This includes the use of the Early Years Pupil Premium. Resources are used to sustain approaches which have been successfully piloted with short-term funding. • There is some decommissioning where there is evidence for an alternative, more evidence-based approach.
4 MATURE	• Mapping and analysis of resources for maternity and early years services, including childcare places, SLCN and community assets, is routine & comprehensive and informs future resource allocation as part of the early years strategy. • There is evidence of significant shifts in investment to early years prevention and early intervention. The early years is a key priority in the local budget setting process.

Sources of evidence / guidance to support further development

- 'Language as a child wellbeing indicator' (EIF, September 2017): Makes the case for children's language development as a public health wellbeing indicator and, specifically, the need for local authority public health teams to jointly commission speech, language and communication services with other local authority colleagues, and CCGs. Also explains current limitations in understanding costs of early language difficulties to the public sector and the potential economic benefits of effective interventions.

- SLCN Commissioning Tools (The Communication Trust): A set of tools designed to improve commissioning for SLCN, which cover needs assessment, whole system mapping and design, user involvement & consultation, workforce planning, and evaluating outcomes.

- 'Better Communication: Shaping speech, language and communication services for children and young people', (2012, RCSLT): Commissioning in practice examples.

- Rotherham case studies on using Early Years Pupil Premium to target communication and language.

- 'Study of Early Education and Development: Experiences of the Early Years Pupil Premium' (DfE, January 2017): A qualitative study of how EYPP funding is used and its perceived impact on disadvantaged children, including addressing speech, language and communication needs.

- Case study example of joint commissioning in Reading.

PLAN	3. WORKFORCE PLANNING

This element focuses on local arrangements for ensuring that the multi-agency workforce has the right skills and confidence to deliver the local early years strategy. This includes analysing workforce needs across the system, and delivering capacity and capability through redesign, recruitment and training.

3.1 WORKFORCE ANALYSIS

3.2   Workforce development

1 BASIC LEVEL	• There is limited understanding about who in the workforce can impact on early years speech, language and communication, and what their learning needs are, but a commitment to working collectively on workforce issues.
2 EARLY PROGRESS	• Multi-agency workforce needs are being mapped across the early years, and specifically on speech, language and communication. Capacity and skills audits or training reviews are underway with a focus on the role of health visitors, early years practitioners and teachers, family support in children's centres, as well as specialist speech & language therapists.
3 SUBSTANTIAL PROGRESS	• The specific role of different workforces across maternity and early years services in responding to speech, language and communication needs is clearly identified, including what can be done through early intervention in universal services. • Workforce needs are analysed and understood, and speech, language and communication skills are part of skills audits. Capacity gaps are addressed through staff training, service redesign or recruitment, taking account of the wider early years system rather than just focusing on individual agencies. • Indicators of staff performance, awareness and satisfaction are positive, and many staff champion the importance of speech, language and communication as a child wellbeing indicator.
4 MATURE	• The workforce capacity skills and knowledge required to impact on early years speech, language and communication are part of role specifications, recruitment & retention strategies, and competency frameworks. • Systematic skills audits are regularly repeated and outcomes used to drive future planning. • Staff are engaged and report high satisfaction levels; consistently champion early years services; and are recognised for effective practice on SLCN. • Organisations have a learning culture, and feedback informs future training and practice across agencies.

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PLAN	3. WORKFORCE PLANNING
	3.1 Workforce analysis
	3.2 WORKFORCE DEVELOPMENT

1 BASIC LEVEL	• There are few examples of early years training across health, education and social care services.
2 EARLY PROGRESS	• There are opportunities for some staff in key roles across health, education and social care services to participate in training on SLCN. • Specialist speech & language therapists have a key role in providing training to the wider workforce.
3 SUBSTANTIAL PROGRESS	• There is a strategy for building the capacity and capability of the early years workforce which includes promoting children's speech, language and communication development and providing effective support for children with lower-level needs as well as those with more severe or complex difficulties. • Practitioners across the early years workforce access training in common skills and processes. Training supports delivery of the early years strategy, and there is evidence of good take-up. Settings and services identify language leads whose role is to support their colleagues' professional development. • The importance of qualified teacher status in the delivery of early education services is emphasised in recruitment.
4 MATURE	• The workforce receives high quality training & supervision on prevention and early intervention in the early years, which includes meeting SLCN. • There is an agreed early years CPD offer which supports the workforce to apply the latest evidence to their practice. • The professional competencies needed to deliver effective early years services are well understood. • Settings and services receiving formal accreditation for expertise in speech, language and communication are deployed to support others in their learning and development.

Sources of evidence / guidance to support further development

• Speech, Language and Communication Framework: A free online professional development tool from The Communication Trust which sets out the key skills and knowledge needed by the children and young people's workforce to support the speech, language and communication development of all children and young people.

• What Works Training Database: information about the evidence for evaluated speech, language and communication training programmes for practitioners.

• Case study of early years workforce development in Blackpool.

• Case study of a local professional development strategy in Warwickshire.

• Case study of the 'Talk About' training programme in Norfolk.

• Overcoming Barriers: A Workforce Briefing (The Communication Trust, 2016): A practical guide to overcoming barriers to professional development for early years practitioners, with case studies

Navigation markers: 1.1, 1.2, 2.1, 2.2, 3.1, 3.2, 4, 5, 6.1, 6.2, 7.1, 7.2, 7.3, 8.1, 8.2, 8.3, 9.1, 9.2, 10.1, 10.2

EIF maturity matrix: Speech, language and communication in the early years

LEAD	4. PARTNERSHIP

This element focuses on the strategic arrangements for joint working between partners and how this drives forward delivery of the local early years strategy.

1 BASIC LEVEL

- Some partner agencies have bought into the principle of a more joined up approach to the early years, and focusing on SLCN, but levels of engagement are low and the partnership is not yet broad.
- There is some discussion of and commitment to a joined up early years approach at partnership boards for children or health and well-being, but no governance structure to deliver early years goals.

2 EARLY PROGRESS

- An identified partnership group has lead responsibility for delivering early years goals, including SLCN, and this links to the work of the local authority and CCGs on SEND joint commissioning.
- The partnership group brings together a growing group of agencies including Clinical Commissioning Groups and Public Health. Partners are contributing to the development of the local strategy and action plan.
- There is willingness amongst partners to share responsibility, design solutions and take action.

3 SUBSTANTIAL PROGRESS

- A broad and active partnership group is responsible for a strategy and action plan to deliver early years goals, and is having a positive impact. Governance of delivery of the strategy is clear and partners have a shared understanding of goals, performance and their role in taking action. There is an agreed process for addressing areas of underperformance.
- Partners actively contribute and engage, and there is some open constructive challenge in partnership groups. There is trust and effective working relationships between key partners such as the local authority, CCG, schools & early years providers.

4 MATURE

- An influential and effective partnership group actively owns the early years strategy and action plans and leads effective delivery across local agencies. Partners constructively challenge & hold each other to account with a focus on impact for children and families. There are strong partnerships between early years settings of different types, including schools.
- The importance of the early years and SLCN is recognised more broadly and prioritised by the Health & Wellbeing Board, and Children's Boards.

Sources of evidence / guidance to support further development

- National Literacy Trust Hubs: A place-based response to tackling low literacy (NLT, 2016): Describing a five-pillar model deployed in Middlesbrough, Peterborough and Bradford which is driven by a Hub partnership group and provides a blueprint for multi-agency co-operation by bringing public, private and voluntary organisations together.

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LEAD	5. LEADERSHIP

This element focuses on how this agenda is led and championed at a local level, and how leadership is distributed across the community and local organisations.

1 BASIC LEVEL	• There is an increasing awareness of the importance of speech, language & communication as a child wellbeing indicator, championed by some local advocates, and some support for a more joined up approach to early years goals.
2 EARLY PROGRESS	• Some senior leaders give consistent messages about the importance of speech, language and communication as a child wellbeing indicator, and a more joined up approach to early years goals.
3 SUBSTANTIAL PROGRESS	• There is active buy-in and understanding at both operational and strategic levels about the importance of speech, language and communication as a child wellbeing indicator, and a more joined up approach to early years goals. This buy-in is shown by investment of time and resources, and a consistent and visible personal commitment. • The local culture encourages innovation and collaboration in how services are planned and delivered, alongside a focus on using evidence.
4 MATURE	• Senior leaders, including local politicians, speak with 'one voice' on the importance of speech, language and communication as a child wellbeing indicator, and are advocates and champions for the delivery of the local early years strategy.

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Sources of evidence / guidance to support further development

• 'Language as a child wellbeing indicator' (EIF, September 2017): Makes the case for prioritising early language skills as a primary child wellbeing indicator.

LEAD	6. COMMUNITY OWNERSHIP

This element focuses on how this families and the local community are engaged in the design and delivery of the local early years strategy. It also considers the use of community assets to sustain change.

6.1 ENGAGEMENT

6.2 Community assets

1 BASIC LEVEL	• Children and families are engaged through formal consultation and engagement mechanisms. Views are taken into account in strategy and service development. This may be generic rather than specific to the early years or to SLCN.
2 EARLY PROGRESS	• The views of children and families inform strategy through formal consultation focussed on early years issues & goals. • Some family champions are involved in the strategy development process.
3 SUBSTANTIAL PROGRESS	• Families are involved in the co-design of strategy, in commissioning and procurement processes, and in governance structures where decisions about early years priorities are made. • The customer journey is considered and used to inform service and workforce development. There are examples where families have successfully challenged local arrangements.
4 MATURE	• Families are routinely engaged in the co-production of strategy, commissioning and delivery plans relating to early years goals. Review and planning of services is routinely informed by experiences of the service users and engagement mechanisms are integrated into business as usual. • Arrangements for collecting user experience of early years services are routine and embedded, and families are involved in quality assuring services and leading change.

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EIF maturity matrix: Speech, language and communication in the early years

LEAD	6. COMMUNITY OWNERSHIP
	6.1 Engagement
	6.2 COMMUNITY ASSETS

1 BASIC LEVEL	• There may be some community-led early years projects and services but this is not yet part of a coherent strategy.
2 EARLY PROGRESS	• Examples of peer support, community development and involvement in delivery of early years services are in place and seen as part of an overall approach. Work is under way to map and develop capacity of communities & voluntary organisations to contribute to early years goals.
3 SUBSTANTIAL PROGRESS	• Peer support, community development and involvement in delivery are part of the overall early years strategy and make a key contribution. • Parents and community volunteers train alongside professionals, and co-facilitate training. • Work is underway to build community capacity further.
4 MATURE	• Peer support, community development and involvement in delivery is a key part of the local portfolio of services and support. Communities are actively providing early years services where this can meet need effectively; they are also part of evaluation and monitoring arrangements. • Parent champions have a key role in promotion, prevention and encouraging the take up of services for SLCN.

Sources of evidence / guidance to support further development

• Speech, Language and Communication Needs: User Involvement and Consultation (Commissioning Support Programme, 2011): provides guidance on involving families in co-design and commissioning processes.

• Volunteering & Early Childhood Outcomes Evidence Review (Big Lottery Fund / Parents 1st, 2017): A review of the impact of volunteering, peer support and 'community champion' projects on early childhood outcomes, including a framework and tools to support organisations to develop and deliver volunteer projects.

EIF maturity matrix: Speech, language and communication in the early years

DELIVER	7. SERVICES & INTERVENTIONS

This element focuses on how, at an operational level, local services deliver quality early years services, how they collaborate with each other using common systems and processes, and how evidence-based programmes are used.

7.1 QUALITY

7.2 Evidence-based programmes / interventions

7.3 Coordinated working

1 BASIC LEVEL
- Some key maternity and early years services are judged to be underperforming.
- Most children receive mandated Healthy Child Programme checks but use of ASQ3 at age 2 is patchy.
- There is variable understanding within each service of the role they can play in supporting children to develop speech, language and communication skills.

2 EARLY PROGRESS
- Service quality for early years settings, children's centres and health visiting is generally good and improving.
- Most children receive mandated Healthy Child Programme checks, and gaps are known and being tackled.
- Take-up of early education entitlements is increasing, including the two-year old offer.
- The children's centre offer includes a focus on developing early speech, language & communication skills in children under 2 and support for the home learning environment.

3 SUBSTANTIAL PROGRESS
- Service quality is generally good and improving for the majority of services which are key to supporting children to thrive in their early years.
- All relevant services, including maternity services, early education settings, Troubled Families services, Speech & Language Therapy services, library services and services for children with Special Educational Needs & Disabilities recognise their role in a joined-up approach to SLCN and report on the key indicators.
- Universal services use recognised tools to screen whole cohorts of children, so that they can target light touch support or identify needs which require specialist assessment and support. All children receive mandated Healthy Child Programme checks as a minimum.
- There is high take-up of early education entitlements, including the two-year old offer, and most children in childcare attend settings rated as good or better. Settings use small group targeted help and two-generation approaches to support the development of speech, language and communication skills. Early years services work well with schools on transition for children with identified needs.
- Speech and language therapists and advisory teachers provide modelling, coaching and support for staff in universal settings.

4 MATURE
- Service quality and performance is good or excellent for the majority of services which are key to supporting children to thrive in their early years.
- Each service is clear how they contribute to the local early years strategy, and help to achieve speech, language and communication goals.
- All children receive the mandated Healthy Child Programme checks as well as other locally defined routine checks.
- All disadvantaged 2 year olds either attend a high quality nursery or receive appropriate alternative support.

DELIVER	7. SERVICES & INTERVENTIONS

	7.1 Quality

	7.2 EVIDENCE-BASED PROGRAMMES / INTERVENTIONS

	7.3 Coordinated working

1 BASIC LEVEL	• There is a recognition of the importance of evidence based early years interventions, but the evidence for existing local early years services is unclear.
2 EARLY PROGRESS	• Some evidence-based interventions or programmes are being considered or starting to be implemented. This includes intensive home visiting interventions, & two generation programmes which help parents to scaffold children's learning at home.
3 SUBSTANTIAL PROGRESS	• Evidence based early years, parenting and speech & language interventions are embedded in specifications for a number of key mainstream maternity and early years services.
4 MATURE	• There is a coherent portfolio of evidence-based interventions shown to improve speech, language & communication outcomes which are embedded in service specifications and targeted accurately.

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EIF maturity matrix: Speech, language and communication in the early years

DELIVER	7. SERVICES & INTERVENTIONS
	7.1 Quality
	7.2 Evidence-based programmes / interventions
	7.3 COORDINATED WORKING
1 BASIC LEVEL	• Join-up between different agencies is limited and dependent on goodwill. • There is interest in developing shared early years pathways and single points of contact so that families can access support services easily, including for SLCN.
2 EARLY PROGRESS	• 'Team around the family' working is in place but usage is inconsistent. • Organisations are working together to develop shared early years pathways, including for SLCN.
3 SUBSTANTIAL PROGRESS	• Family centred practices such as team around the family are commonplace in all the main maternity & early years services and integrated with the work of Troubled Families services. • Common processes for referral and assessment are understood and applied across consistent thresholds, and practitioners use a common language to describe how needs are identified, assessed & met. • An integrated early years pathway for speech, language and communication includes key touchpoints and mechanisms for identifying SLCN, along with appropriate, evidence-based action and follow up.
4 MATURE	• Family centred practices such as team around the family are embedded in all relevant services, and integrated with the activity of universal & specialist services. • Comprehensive pathways are used for a full range of needs. Pathways have been revised to take account of impact, user feedback and new evidence on what works. • All early years support is provided with a focus on family outcomes jointly agreed with the family but aligned to a consistent outcomes framework, focussing on their needs and strengths. Families who need it have a consistent key worker.

Sources of evidence / guidance to support further development

• 'Foundations for Life: What works to support parent child interaction in the early years' (EIF, July 2016): Evidence and costs for 20 interventions that aim to support children's early cognitive and language development through parent-child interaction.

• EIF Guidebook: Details of home visiting programmes which have evidence that they can improve child language outcomes, such as FNP, Child First and Parents as First Teachers.

• 'What works to enhance the effectiveness of the Healthy Child Programme: An evidence update' (EIF, July 2018): Includes a short section on home visiting interventions shown to support children's early language outcomes (pages 90-91).

• 'Better Communication: Shaping speech, language and communication services for children and young people', (2012, RCSLT): Section 3: Delivering cost-effective high-quality services.

• 'What Works', a moderated online library of evidenced interventions that aim to support children's speech, language and communication, developed by the Communication Trust and endorsed by the Royal College of Speech and Language Therapists.

• Three case studies on the use of small group targeted help and - generation approaches to support the development of speech, language and communication skills: Bishop Alexander L.E.A.D. Academy in Newark-on-Trent; Robert Mellors Primary and Nursery School Foundation Unit in Nottingham; and Wentworth Nursery School.

DELIVER	8. INFORMATION & DATA

This element focuses on how local services collect and share both personal data to support care planning, and anonymised information about service use to support targeting of support. It also considers what information is available for families about maternity and early years services and where they can find support.

8.1 DATA COLLECTION / USE FOR TARGETING

8.2 Information sharing

8.3 Information for families

1 BASIC LEVEL
- There is limited connection between outcomes on the ground and strategic decisions about early years services, but it is recognised that this needs to change.
- Early years services are largely targeted on historic patterns of need and there is patchy coverage.

2 EARLY PROGRESS
- Intelligence from early years practitioners is sometimes used to inform strategic needs analyses and service design work.
- Early years services are targeted using current data at some priority groups, particularly taking account of family income, although not consistently.
- Effective targeting is monitored, but mostly by different services using their own monitoring systems.

3 SUBSTANTIAL PROGRESS
- Information from early years delivery on the ground is often used in strategic needs analyses and service design work.
- Practitioners across early years services use shared data (including SLCN at key touchpoints) to target support at priority groups according to the local needs assessment, and use a joined-up impact monitoring process for individual cases.

4 MATURE
- Intelligence from delivery routinely informs strategy, evaluation, commissioning, service & workforce design.
- Integrated monitoring systems are in place and used across early years services to coherently target interventions at priority groups with different needs identified in the local needs assessment. Services are flexed to respond to demand, using live data.

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DELIVER	8.	INFORMATION & DATA

8.1	Data collection / use for targeting

8.2	**INFORMATION SHARING**

8.3	Information for families

1 **BASIC LEVEL**	• There is a commitment to recording and sharing personal data and work is under way on information sharing agreements, for example on sharing NHS live birth data with the Local Authority. • There is little sharing and combining of early years data about individual families across agencies.
2 **EARLY PROGRESS**	• Some information sharing is happening across key early years services. Strategic information sharing agreements are in place but not fully operationalized. Live birth data is shared, and information from the health visitor 2-year review is routinely shared with other practitioners working with the child. • Some common processes are in place to enable electronic sharing of personal early years data.
3 **SUBSTANTIAL PROGRESS**	• Routine and timely information sharing happens across a range of early years services, and is used to inform operational delivery of services. • Strategic and operational information sharing agreements are in place and working well. Information sharing about vulnerable families begins during pregnancy.
4 **MATURE**	• There is routine and timely sharing and matching of data across all agencies to identify and assess individual and family risks, needs and strengths. • IT systems are designed to support multi-agency approaches and facilitate information sharing.

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EIF maturity matrix: Speech, language and communication in the early years

DELIVER	8. INFORMATION & DATA
	8.1 Data collection / use for targeting
	8.2 Information sharing
	8.3 INFORMATION FOR FAMILIES

1 BASIC LEVEL	• Messages for families about early child health and development and the support available are limited and not co-ordinated.
2 EARLY PROGRESS	• Some services use shared messaging for families about evidence based early child health and development, and how to promote early language development with infant directed speech and books. This shared messaging is supported by the Local Offer.
3 SUBSTANTIAL PROGRESS	• Information for parents and carers on early child health and development is accessible, understood and consistently conveyed to families across the early years workforce. This covers the importance of good speech, language and communication skills, how to promote them, and family entitlements. • The Local Offer is up-to-date, comprehensive, high quality and responsive to parent feedback.
4 MATURE	• Families access up to date and accurate service information in a range of ways, with appropriate support to do so where this is needed. The Local Offer is an important part of this. • Services work together to devise innovative ways of reaching disadvantaged families and those whose first language is not English

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Sources of evidence / guidance to support further development

• Examples of online information for parents and carers on SLCN: Nottinghamshire Top Tips; 'time to talk' Warwickshire; Worcestershire SLCN Pathway for Parents; Stoke Speaks Out.

EVALUATE

9. OUTCOMES

This element focuses on how progress in early years outcomes is measured, and what the experience of support is like from the perspective of families. It includes using tools like an outcomes framework.

9.1 OUTCOMES FRAMEWORK

9.2 Family access & experience

1 BASIC LEVEL

- It is recognised that SLCN should have a high profile alongside other early years measures.

2 EARLY PROGRESS

- An early years outcomes framework which explicitly references early education and SLCN is being developed. The framework will start from the antenatal period.

3 SUBSTANTIAL PROGRESS

- An early years outcomes framework which explicitly references SLCN is in place and designed around the priorities in the early years strategy.
- SMART measures have been agreed, using validated measurement tools where possible, and data is routinely collected and reported.
- Family take-up and experience of services by different groups (such as disadvantaged families, and those for whom English is not the first language) are included in outcomes reporting.
- Performance against locally defined outcomes is starting to show signs of improvement against baselines.
- Service and case audits consider the effectiveness of the local system for vulnerable families and findings are used to inform service redesign.

4 MATURE

- The early years outcomes framework is embedded and visible within a wider partnership framework of outcomes and indicators. Validated measurement tools are routinely used.
- Partners have a clear view of which parts of the system are working well, and use this to inform strategy, hold service providers to account and inform service development.
- Outcomes show consistent improvement, and where sufficient improvement is not seen analysis is under way to understand why.

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EVALUATE	9. OUTCOMES
	9.1 Outcomes framework
	9.2 FAMILY ACCESS & EXPERIENCE
1 BASIC LEVEL	• Early years services are often child-focused but involve a number of services interacting with a family and taking different approaches to SLCN.
2 EARLY PROGRESS	• Some families experience a smoother journey through early years services as a result of a focus on support for SLCN.
3 SUBSTANTIAL PROGRESS	• Families generally have a smooth journey through early years services and get timely and consistent support for children with SLCN. Specialist services (including speech and language therapy) are provided in accessible community settings.
4 MATURE	• Families have a smooth journey through all early years services, and get timely and consistent support for children with SLCN . They only have to tell their story once and are offered personalised support.

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EVALUATE

10. USING & GENERATING EVIDENCE

This element focuses on how progress local partners find and apply evidence from research and practice, as well as generating robust local evidence.

10.1 USING EVIDENCE WELL

10.2 Local evaluation

1 BASIC LEVEL
- It is recognised that using early child development evidence is important, but there is limited understanding about what is reliable evidence.

2 EARLY PROGRESS
- Some key local stakeholders are reviewing the latest evidence on maternity and early child development and considering what this means for local services.

3 SUBSTANTIAL PROGRESS
- Local leaders and decision-makers are confident users of evidence, able to distinguish between credible research evidence and asserted opinion.
- Fidelity for evidence-based programmes is monitored and reported on.

4 MATURE
- Local leaders and decision-makers routinely draw on reliable evidence to inform resource use and service design, and challenge policy with a weak evidence base.

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EVALUATE	10. USING & GENERATING EVIDENCE
	10.1 Using evidence well
	10.2 LOCAL EVALUATION
1 BASIC LEVEL	• Local evaluation is recognised as important.
2 EARLY PROGRESS	• There are some examples of local evaluation of early years services but not to consistent quality standards or criteria.
3 SUBSTANTIAL PROGRESS	• A consistent approach to evaluation of impact for maternity and early years services is a recognised goal and work on an evaluation framework is underway. • Local evaluation findings are used to inform tactical and operational decisions as well as strategy and planning decisions.
4 MATURE	• A common evaluation framework is used across early years services which recognises different standards of evidence. Local evaluations generally use validated measures and some use comparison groups. The consistent approach to evaluation supports experimentation and innovation. • The local evidence base is growing and informs future service development. Other places use the learning to support their own policy decisions.

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Sources of evidence / guidance to support further development

• EIF online resources on Using Evidence

• EIF: Early intervention into action: Innovation and evaluation

• EIF: 'How do we know it works?'

• EIF: Evidence Standards

• Education Endowment Foundation's Early Years Toolkit, Communication & Language Approaches: summarises the evidence on what works.

• Evidence briefings for policy makers from LuCiD, the ESCR International Centre for Language and Communicative Development, including on topics such as how shared book-reading can help boost child language development; myths and misconceptions about language development in multilingual children; and how to overcome the barriers that prevent many disadvantaged families from engaging with programmes.

• Year of Evaluation report from Nottinghamshire Children's Centre Speech and Language Therapy Services.

• The Sefton Project case study: evaluate the effectiveness of training for early years practitioners

Recording sheet, EIF maturity matrix: Speech, language and communication in the early years   Area: ....   Date: ..../......./20.....

		PROGRESS LEVEL	Evidence of current progress	Gaps and areas for development	Priority actions
PLAN	1. Strategy				
	2. Commissioning				
	3. Workforce Planning				
LEAD	4. Partnership				
	5. Leadership				
	6. Community Ownership				
DELIVER	7. Services & Interventions				
	8. Information & Data				
EVALUATE	9. Outcomes				
	10. Using & Generating Evidence				